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Headteacher: Mrs Sharon Nour

*Inspired to learn, motivated to achieve*

28<sup>th</sup> February 2019

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Dear Parents/Carers,

### **'Crucial Crew' Visit – Monday 4<sup>th</sup> March 2019**

On Monday 4<sup>th</sup> March, Year 6 children have been invited to take part in Crucial Crew.

Crucial Crew is a superb example of different agencies working together. Public Services and organisations that will be involved include Norfolk Constabulary, St John Ambulance, Norfolk Resilience Forum, UK Power Networks, HM Coastguard, The Matthew Project and Norfolk Fire & Rescue Service.

Crucial Crew is an interactive safety initiative aimed at 10/11 year olds. It will comprise of 8 theatre style sets that recreate situations of crime and danger. The children proceed around the course in groups of five to nine, spending approximately 10 minutes at each scenario.

They will experience and participate in a range of realistic situations which are potentially life-threatening in order to raise their awareness of what they can do to increase their own and others safety.

They will be leaving school by minibus at 11:30am and return by the end of the day. They will need to bring a packed lunch and waterproof coat and adequate drinking water. No school packed lunches will be available. Please complete and return the attached consent form by Friday 1<sup>st</sup> March.

Yours sincerely

Charlotte Owen-Smith  
Teacher

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## Parental Consent Form - Category A Visits

I give my consent for my child ..... to attend Crucial Crew, Letton Hall, Shipdham on Monday 4<sup>th</sup> March 2019

Signed ..... Parent/carer Date .....

### To be completed by the Visit Leader:

Please return to : \_Charlotte Owen-Smith \_ (Visit Leader) Tel No: \_\_01328 701357

The Visit Leader who will only divulge information on this form to other staff as necessary, to ensure the welfare and safety of the participant.

Group: \_\_Year 6 \_\_\_\_\_ Place of visit: \_Crucial Crew, Letton Hall, Shipdham \_\_\_\_

Date of Visit: Monday 4<sup>th</sup> March 2019

Method of travel: Minibus (seat belts fitted as standard Yes/No)

### To be completed by the Parent/Guardian

I am willing for my child \_\_\_\_\_ Class \_\_\_\_\_

to take part in the above visit/journey and, having read the information provided, I agree to his/her taking part in the activities described.

I fully understand and accept that, while the supervisory adults in charge of the group will take all reasonable care of the young people, neither they, nor Norfolk County Council, can necessarily be held liable in respect of loss or damage to property or injury suffered by my child arising out of the educational visit/journey, unless such loss, damage or injury results from the negligence of Norfolk County Council, its employees or official volunteers.

I give/do not give\* permission for photographs of my child to be taken by leaders or the Press.

I give/do not give\* permission for my child/ward to receive pain relieving medication when appropriate (one dosage of paracetamol only).

\* please delete as appropriate

I agree to my child/ward receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

I understand the extent and limitations of the insurance cover provided.

Signature of Parent / Guardian: \_\_\_\_\_  
(if participant is under 18)

Signature of Participant:: \_\_\_\_\_

Should there be any amendments to this form after it has been handed in, please contact the Visit Leader immediately.